

Public Chapter 510

HOUSE BILL NO. 1786

By Representatives Sherry Jones, Beavers, Brooks, Langster, Bowers

Substituted for: Senate Bill No. 710

By Senator Dixon

AN ACT to enact the "Health Care Consumer Right-to-Know Act of 1997".

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Health care is a valuable commodity. The State of Tennessee deems it important that Tennesseans be able to select their physicians and make an informed decision when choosing a physician. Due to current trends in health care, patients have a close relationship with their primary care physician and must depend on him or her for most of their health care needs. Health care consumers need to know as much as possible about a physician before committing their health care to him or her. Because of the foregoing reasons and because of the increasing concerns over the quality of health care, the General Assembly finds that a system should be established to provide public access to information about the licensed physicians in this State. Therefore, there is hereby created a Special Joint Committee to study proposed legislation and other issues relative to enabling health care consumers in the State of Tennessee to access information regarding health care professionals.

SECTION 2. The Special Joint Committee shall be composed of four (4) members of the Senate and four (4) members of the House of Representatives, to be appointed by the respective Speakers.

SECTION 3. (a) At the request of the Chair, all appropriate agencies of State Government shall provide staff assistance to the Special Joint Committee.

(b) The committee shall be convened by the member with the most years of continuous service in the General Assembly, and at its first meeting shall elect from its membership any officers the committee deems necessary.

(c) The special committee shall timely report its findings and recommendations, including any proposed legislation or interim reports to the 1998 Session of the One-Hundredth General Assembly no later than January 15, 1998, at which time the committee shall cease to exist.

(d) The committee shall investigate the most efficient and cost-effective methods by which any such program could be implemented, with special emphasis placed on recommending a source of funding for the proposed program.

(e) The committee in its deliberations shall concentrate on devising methods for, and making recommendations on:

(1) Disseminating information to consumers;

(2) Ensuring that errors are not present in health care professional records, and that those involved have a meaningful opportunity to examine and correct such records before they are released to consumers;

(3) What appropriate information is best provided to the consumer, and the format in which that information will be presented;

(4) The appropriate agency, or agencies, responsible for overseeing such a program;

(5) The desirability and feasibility of similar consumer programs in other professional fields, and,

(6) Specific penalty provisions to be enforced by the appropriate professional licensing board.

(f) In order to avoid any obstacles or unforeseen complications in the development and implementation of this consumer service, the committee should closely study any similar types of programs operating throughout the country.

(g) The committee shall research other entities that may currently be collecting such data, and report on the prospects of contracting with such entities for the creation and provision of such a consumer information program.

SECTION 4. This act shall take effect upon becoming law, the public welfare requiring it.